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PATENT

Atty. Docket No. 31949/2
Express Mail Label No. EJ621326605US

JC944 U.S. PTO
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01/04/01

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
UTILITY APPLICATION AND APPLICATION FEE TRANSMITTAL LETTER**

COMMISSIONER FOR PATENTS

Box Patent Application
Washington, D.C. 20231

Transmitted herewith for filing is the patent application of

Inventors: Joseph A. Leveque, M.D., Lori Dolan Frymark, and Douglas D. Lind, M.D.

Title: COLLECTING AND MANAGING CLINICAL INFORMATION

Enclosed are:

1. ☒ 26 pages of specification, 11 pages of claims, 1 page of Abstract.
2. ☒ 16 sheets of drawing is (are) enclosed. The drawings are informal.
3. ☒ 3 pages of Declaration and Power of Attorney:
☒ has been executed by all the inventors; or
☐ has not been executed by all the inventors. An executed Declaration and Power of attorney will be submitted in due course.
☐ Copy from prior application
☐ Deletion of inventors including Signed Statement under 37 C.F.R. § 1.63(d)(2).
4. ☒ The application is assigned to Scientia.
☒ An Assignment (4 pages, executed) and Recordation Cover Sheet (2 pages) are enclosed. Please record the Assignment and return it to the undersigned.
☐ Assignment papers were filed in parent application Serial No. _____.
☐ A Certification of chain of title pursuant to 37 C.F.R. § 3.73(b) is enclosed.
☒ A check for \$ 40.00 to cover the recording fee is enclosed.
☐ Please charge the recording fee to our Deposit Account 50-0324, Order No. 31949/2.
A duplicate copy of this paper is enclosed.
5. ☒ Applicant claims Small Entity Status under 37 C.F.R. § 1.27 and 1.28(a).
6. ☒ Return receipt postcard (MPEP 503).

CALCULATION OF APPLICATION FILING FEE

	Number Filed			Number Extra		Rate	Fee
Base filing fee							\$ 355.00
Total Claims	43	-	20 =	23	×	\$ 9.00	\$ 207.00
Independent Claims	14	-	3 =	11	×	\$ 40.00	\$ 440.00
Multiple Dependent Claims	<input type="checkbox"/> yes					\$ 270.00	\$ 0.00
	<input checked="" type="checkbox"/> no					NONE	
						Total:	<u>\$ 1002.00</u>

7. [X] A check in the amount of \$1002.00 in payment of the application filing fees is attached.
8. [X] The Commissioner is authorized to charge any additional required fees, or credit any overpayment, to Deposit Account 50-0324, Order No. 31949/2.

Respectfully submitted,
SHEARMAN & STERLING

Dated: January 4, 2001

By: 

Anthony L. Meola
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Joseph A. Leveque, M.D., et al.

For: COLLECTING AND MANAGING CLINICAL INFORMATION

CERTIFICATE OF EXPRESS MAILING

“Express Mail” Mailing Label No.: EJ621326605US

Date of Deposit: January 4, 2001

I hereby certify that the following:

Return postcard

Checks in the amount of \$1002.00 and \$40.00

This Certificate of Express Mailing

Utility Application and Appl'n Fee Transmittal (2 pages)

PrintEFS bibliographical data sheet (2 pages)

Non-Provisional Utility Patent Application consisting of: cover page, specification (26 pages), claims (11 pages), abstract (1 page)

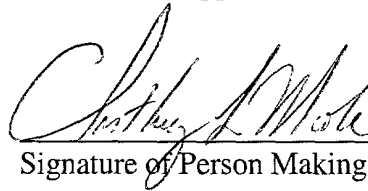
Drawings (16 sheets, informal)

Declaration and Power of Attorney (3 pages, executed)

Recordation Form Cover Sheet (2 pages)

Assignment (4 pages, executed)

are being deposited with the United States Postal Service “Express Mail Post Office to Addressee” service under 37 C.F.R. § 1.10 on the Date of Deposit indicated above in an envelope addressed to the Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.



Signature of Person Making Deposit

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